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SERIAL NUMBER 10/057,519	FILING DATE 01/24/2002 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO.
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APPLICANTS
 Robin Scott Gray, Ellicott City, MD;

** CONTINUING DATA ***** *RM*

** FOREIGN APPLICATIONS ***** *RM*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/25/2002

Foreign Priority claimed ☐ yes ☒ no

35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *RM* Examiner's Signature *RM* Initials

STATE OR COUNTRY
 MD

SHEETS
 DRAWING 9

TOTAL
 CLAIMS 20

INDEPENDENT
 CLAIMS 4

ADDRESS
 ROBIN S. GRAY
 3538 SPLIT RAIL LANE
 ELLICOTT CITY, MD
 21042

TITLE
 Syringe and method of using

FILING FEE RECEIVED 520	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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